

State of Colorado  
Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80203  
Phone: (303) 894-2100 Fax: (303) 894-2109



Document Number:  
402500474

Date Received:  
09/30/2020

FIR RESOLUTION FORM

Overall Status: CAC

CA Summary:

1 of 1 CAs from the FIR responded to on this Form

1 CA Completed  
0 Factual Review Request

OPERATOR INFORMATION

OGCC Operator Number: 96155  
Name of Operator: WHITING OIL & GAS CORPORATION  
Address: 1700 LINCOLN STREET SUITE 4700  
City: DENVER State: CO Zip: 80290  
Contact Name and Telephone:  
Name: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_  
Email: \_\_\_\_\_

Additional Operator Contact:

| Contact Name | Phone | Email                               |
|--------------|-------|-------------------------------------|
| -            |       | <u>WhitingEasternCO@Whiting.com</u> |

COGCC INSPECTION SUMMARY:

FIR Document Number: 696302492  
Inspection Date: 09/15/2020 FIR Submit Date: 09/15/2020 FIR Status: \_\_\_\_\_

Inspected Operator Information:

Company Name: WHITING OIL & GAS CORPORATION Company Number: 96155  
Address: 1700 LINCOLN STREET SUITE 4700  
City: DENVER State: CO Zip: 80290

LOCATION - Location ID: 430313

Location Name: Razor Number: 27L Pad County: \_\_\_\_\_  
Qtrqtr: NWS Sec: 27 Twp: 10N Range: 58W Meridian: 6  
W  
Latitude: 40.808536 Longitude: -103.858364

FACILITY - API Number: 05-123- -00 Facility ID: 430313

Facility Name: Razor Number: 27L Pad  
Qtrqtr: NWS Sec: 27 Twp: 10N Range: 58W Meridian: 6  
W  
Latitude: 40.808536 Longitude: -103.858364

CORRECTIVE ACTIONS:

1 CA# 141931

Corrective Action: For localized stained soils or oily waste - "Properly dispose of oily waste in accordance with 907.e."  
Securely fasten all valves, pipes, and fittings to ensure good mechanical condition, inspect at regular intervals and maintain in good mechanical condition per Rule 605.d.

Date: 09/30/2020

Response: CA COMPLETED Date of Completion: 09/29/2020

Stained soils at wellheads resolved. See attached photos.

Operator  
Comment:

COGCC Decision:

COGCC  
Representative:

OPERATOR COMMENT AND SUBMITTAL

Comment:

I hereby certify that the statements made in this form are, to the best of my knowledge, true, correct, and complete.

Print Name: Bryce Maifeld

Signed:

Title: Regulatory Specialist

Date: 9/30/2020 11:22:43 AM

**ATTACHMENT LIST**

View Attachments in Imaged Documents on COGCC website (<http://ogccweblink.state.co.us/>) - Search by Document Number.

| <u>Document Number</u> | <u>Description</u> |
|------------------------|--------------------|
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|-----------|-------------|
| 402500479 | Photographs |
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Total Attach: 1 Files